



**Form CPF 23 : PETITION TO CLOSE  
DEPOSITORY BANK ACCOUNT  
Office of Campaign and Political Finance**

File with: Director

Office of Campaign and Political Finance  
One Ashburton Place  
Boston, MA 02108  
(617) 727-8352

CPF ID# \_\_\_\_\_

Please print or type all information, except signatures.

1. Candidate Name: \_\_\_\_\_ Tel. No. \_\_\_\_\_
2. Committee Name: \_\_\_\_\_
3. Treasurer Name: \_\_\_\_\_ Tel. No. \_\_\_\_\_
4. Committee Address: \_\_\_\_\_
5. Bank Name: \_\_\_\_\_
6. Bank Address: \_\_\_\_\_
7. Bank Account: \_\_\_\_\_
- Account Name Account Number

**I/we request permission to close the above account for the following reason:**

**CHECK ONE:**

**Candidate/Committee wishing to dissolve the committee:**

- ☐ I/we have no money and no debts.
- ☐ I/we have \$\_\_\_\_\_ which I/we intend to donate in accordance with the residual funds clause of M.G.L. c. 55 s. 18. A copy of the check(s) is attached. I/we have no debts.

**Candidate/Committee with no money but with outstanding liabilities:**

- ☐ I/we have no money and wish to close the bank account. I/we understand that if I/we raise money to discharge the committee's outstanding debt I/we must appoint a depository bank and reopen a depository account for all campaign finance activity. I/we understand the committee will continue to have annual filing requirements with OCPF.

**Candidate who does not intend to raise or spend money but who intends to maintain a committee:**

- ☐ I/we have no unpaid obligations and the balance of \$\_\_\_\_\_ will be deposited into a savings or money market account. I/we certify that I/we will appoint a depository bank and open a depository bank account prior to raising or spending any money, including the expenditure of this money placed into a savings or money market account.
- ☐ I/we certify that the balance of \$\_\_\_\_\_ will be used solely for the purpose of influencing the nomination or election of this candidate to \_\_\_\_\_ (specify office that candidate is running for) and that future funds raised or spent by the committee will be for this candidacy only. I/we understand that I/we may have reporting requirements with OCPF.

**SIGNED UNDER THE PENALTIES OF PERJURY:**

\_\_\_\_\_  
Candidate Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Treasurer Signature

\_\_\_\_\_  
Date

**NOTICE TO BANK**  
(OCPF use only)

Name of Bank: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Re: \_\_\_\_\_  
Candidate/Committee Name

The petition to close the depository account for the candidate/committee named above, the details of which are given on the reverse side, is granted. As of this date, the bank has no further reporting obligations on this account.

\_\_\_\_\_  
Director, Office of Campaign and Political Finance      Date